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## CHAPTER 167 INVESTIGATE AN INCIDENT

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### Section 1 Background

#### 1. WPMS ACTIVITY CODES.

- On-Site: 1711
- Other: 1712

**3. OBJECTIVE.** The objective of this task is to perform an incident investigation according to national and district office standards. Successful completion of this task results in a factual report submitted to the National Transportation Safety Board (NTSB) that will have established the facts, conditions, and circumstances surrounding the incident. Completion of this task may also result in an enforcement investigation of an air operator, air agency, or an airman or the counseling of an airman.

#### 5. GENERAL.

##### A. *Definition.*

(1) An incident is defined as an occurrence other than an accident, associated with the operation of an aircraft, which affects or could affect the safety of operations. This definition covers a broad spectrum ranging anywhere from some type of damage to an aircraft (other than an accident) to a possible violation of the FAR or an operational error (e.g., ARSA incursion, runway incursion, altitude deviation, etc.)

(2) An Air Traffic Accident Package is defined in Order 8020.11.

**B. *FAA Order 8020.11, Aircraft Accident and Incident Notification, Investigation, and Reporting.*** FAA Order 8020.11 is not superseded by this order. It is highly recommended that ***the most current edition*** of both orders be used during the aircraft incident investigation.

**C. *Incidents/Aircraft Damage.*** Detailed procedures for incidents involving aircraft damage are contained in Related Task #168, Investigate an Accident.

**D. *Pre-Accident Plan.*** The district office pre-accident plan developed in Related Task #168, Investigate an Accident, Section 1,

paragraph 9, should be used, as required, for an incident investigation.

**7. TYPES OF INCIDENT INVESTIGATIONS.** Type of incident refers to the immediate circumstances of the incident, not its causes. Unless the IIC first forms as clear a picture as possible of **WHAT** happened, the IIC is hard put to approach the **HOW** and **WHY** of the incident methodically.

**A. *Incidents Involving Military Aircraft.*** Incidents involving military aircraft shall be investigated in accordance with Order 8020.11.

**B. *Foreign Incidents.*** Foreign incidents will be investigated in accordance with Order 8020.11.

**C. *Other Types of Incidents.*** Incidents involving hijack, sonic boom and noise complaints, reckless flying reports, hazardous materials, UFO's, emergency evacuations, parachute jumping, and criminal occurrences are discussed in Order 8020.11 and shall be investigated according to procedures described in that order.

**9. METHOD OF INVESTIGATION.** The type of incident will dictate what action the IIC should take (e.g., on-site investigation, by telephone, etc.)

**A. *Office Investigation.*** Incidents other than those involving aircraft damage often do not require an on-site investigation. Therefore, the IIC can usually conduct an incident investigation using the telephone. When specific airman or aircraft data is required it can be obtained from microfiche, ASAS, or from a reputable and trusted operator (e.g., A & P, chief pilot, etc.)

**B. *On-Site Investigation.*** Although some incident investigations can be handled by the use of the telephone, there will be circumstances which require an on-site investigation. The circumstances vary from district to district and depends on many variables (e.g., geographic location, type of incident, the depth of the FAA's involvement, etc.) FAA policy emphasizes investigations wherever circum-

stances warrant. The IIC determines whether an on-site investigation is necessary based on the initial information received regarding the incident.

**C. *Organize the Investigation.*** Organizing an incident investigation is a dynamic process which begins with the initial notification and continues throughout the investigation. There may be occasions when the IIC is the only participant in the investigation. In this instance, the IIC should still formulate a plan that can be followed throughout the investigation.

**11. POST-NOTIFICATION ACTIVITIES.** The actual incident notification procedures are not discussed here; they are thoroughly described in Order 8020.11 and in current GENOT's which contain special emphasis notification.

**A. *Witness Statements.*** When taking witness statements over the telephone use FAA Form 1360-33, Record of Visit, Conference, or Telephone

**B. *Pilot Deviations.*** If the incident involves a pilot deviation or operational error, the IIC requests that the reporting Air Traffic Facility make a certified true copy of all pertinent ATC flight progress strips, communication tapes, and radar printouts, if appropriate.

(1) These tapes should be sent to the district office as soon as possible so that the IIC can use them for the investigation. These tapes will become a part of the final report.

(2) It is important for the investigator to obtain copies of pertinent information from the air traffic service as soon as possible. For example, flight service stations are required to keep hard copies of weather information for 10 days. After that, the weather information can be obtained from the National Weather Center in Asheville, NC, but that process can take several weeks.

**C. *Analysis Considerations.*** During the documentation and investigation process certain evidence requires more detailed examination. The IIC is continually evaluating evidence as a possible contributing factor or incident cause. The IIC will use the procedures listed in Related Task #168, Section 1, paragraph 11M, as a basis for forming his or her analysis.

**D. *Incident Reports.*** Accident prevention is based on data contained in the accident/incident reports; logically then, accident prevention can be only as effective as the report is correct and complete. Unfortunately, the incident report often proves to be the weak link in the accident/incident prevention chain. Therefore the IIC should take special care in the wording of as well as the gathering of information to compile that report.

**E. *Non-Concurrence.*** During investigations conducted by the NTSB or the military, if an FAA participant does not concur with the report, then the participant so informs the group chairman in writing, giving the reasons for the nonconcurrence. A copy of the nonconcurrence is furnished immediately to the FAA IIC and to AAI-100. In addition, participants make an immediate verbal report followed as soon as possible thereafter, if requested by the FAA IIC, with a written report to the FAA IIC whenever any FAA areas of responsibility are involved. (Refer to Chapter 165, Introduction to Accident/Incident Related Tasks, paragraph 5B(1)(a)-(i).)

**13. FOLLOW-UP ACTIVITY.** If a pilot deviation investigation is not completed within the required 90 days, indicate the status of the investigation on the reverse side of FAA Form 8020-11. Distribute in accordance with Order 8020.11. In this case, the final report FAA Form 8020-5 is still required when the investigation has been completed.

**15. UPGRADING AN INCIDENT TO AN ACCIDENT.** If the investigation reveals facts which would indicate that the incident should be upgraded to an accident, the IIC shall notify the appropriate Air Traffic facility and the NTSB and proceed with the procedures outlined in Related Task #168, Conduct an Accident Investigation.

**17. DOWNGRADING AN INCIDENT TO AN OCCURRENCE.** If the investigation reveals facts which would indicate that the incident should be downgraded to an occurrence, the IIC shall notify the appropriate persons and terminate the task. However, an occurrence could result in the counseling of an airman. (See Order 8740.1, Related Task #11, Counsel an Airman.) When an incident is downgraded to an occurrence, the inspector shall contact the flight service station to have them change FAA Form 8020-9 accordingly.

## Section 2 Procedures

### 1. PREREQUISITES AND COORDINATION REQUIREMENTS.

A. **Prerequisites.** This task requires knowledge of all related FAR, FAA policies and procedures, and qualification as an Aviation Safety Inspector (Operations).

B. **Coordination.** This task may require coordination with the district office clerical personnel, operations and airworthiness unit supervisors, the Regional Operations Center (ROC), and the appropriate Flight Service Station (FSS), as appropriate. This task may also require coordination with the Accident Prevention Program Manager (APPM), the appropriate air traffic facility, the Aircraft Certification Office (ACO), Airway Facilities, Airports, the Flight Inspection Field Office (FIFO), the appropriate National Transportation Safety Board (NTSB) Field Office, Office of Aviation Medicine (CAMI), Office of Civil Aviation Security, National Safety Data Branch, AVN-120, Aviation Standards National Field Office, AVN-1, National Weather Service (NWS), Regional Office of Public Affairs, Regional Counsel, Manufacturer's representatives, operator's representative, Military Safety Center, or state and local law enforcement officials, state or national poison control center.

### 3. REFERENCES, FORMS, AND JOB AIDS.

#### A. References.

- FA Act Of 1958
- Any related FAR
- NTSB Part 830
- National and office policy specific to accident/incident investigation
- Order 1100.5
- Order 1200.23, Public Availability of Information
- Order 2150.3, Compliance and Enforcement
- Order 3550.8

- Order 8020.11, Aircraft Accident and Incident Notification, Investigation, and Reporting (most current edition)
- Order 8700.1, General Aviation Operations Inspector's Handbook
- Any office duty book/procedures

#### B. Forms.

- FAA Form 1360-33, Record of Visit, Conference, or Telephone Call
- FAA Form 8020-2, Aircraft/Part Identification and Release Tag
- FAA Form 8020-3, Facility Accident Notification Record
- FAA Form 8020-5, Aircraft Incident Record
- FAA Form 8020-9, Aircraft Accident/Incident Preliminary Notice
- FAA Form 8020-11, Incident Report

#### C. Job Aids.

- Electronic telephone pager ("beeper")
- Office accident investigation kit
- Sample figures and letters
- Special emphasis forms as required by GENOTS, Notices, or National Policy
- Accident Manual

### 5. PROCEDURES.

A. **Initial Notification.** (See Related Task #166, Perform Telephone Standby.) Record initial incident information on Figure 167-1.

(1) If notification is made by an Air Traffic (AT) Facility, verify that the following has been initiated:

- (a) An FAA Form 8020-9 (Figure 167-2)
- (b) Appropriate notification procedures

(2) Request from the reporting AT Facility the following:

- (a) Flight progress strips
- (b) ATC tapes
- (c) Radar printouts
- (d) Weather information

(3) If the incident involves an operational error and/or deviation, request the AT facility to submit an FAA Form 8020-11. (Figure 167-3)

(4) If notification is made by a source other than an AT facility, notify the following:

(a) Complete FAA Form 8020-9 or record the information required to complete FAA Form 8020-9 and Figure 167-1. Provide this information to the nearest AT Facility, preferably a Flight Service Station, and verify that the appropriate notification procedures are initiated.

(b) The district office manager or the appropriate office representative, in accordance with district office policies, that an incident has occurred.

(c) The Regional Operations Center (ROC) (may be required for certain "high visibility" accidents involving public officials or notable persons)

(d) National Transportation Safety Board (NTSB), as required by NTSB Part 830.

(e) Contact the responsible AT facility and request that certified true copies of the following be submitted:

- (i) Flight progress strips
- (ii) ATC tapes
- (iii) Radar printouts
- (iv) Weather information

B. **WPMS.** Open WPMS file.

C. **Incident Determination.** Determine, based on preliminary information, whether the occurrence fits the definition of an incident.

(1) If the occurrence is an incident proceed with the following steps.

(2) If the occurrence is an accident, see Related Task #168, Investigate an Accident.

#### **D. Determine FAA Involvement in the Investigation.**

(1) If the incident investigation is to be conducted by the NTSB (as per NTSB Part 830.5), follow procedures in Related Task #168, Section 2, paragraph 7A (1) through A (14), as appropriate, until such time as the NTSB investigator arrives.

(2) If the incident is investigated by the FAA or delegated to the FAA by the NTSB, make note of date, time, and name of the NTSB investigator on Figure 167-4 and conduct the investigation in accordance with the procedures in Related Task #168.

(3) If incident does not involve aircraft damage or is an operational error/deviation, determine the most effective method of investigation.

(4) Review reports and all initial information.

E. **Review AT Facility Reports and Other Related Information.** Upon receipt of the requested forms and reports, review for statistical data and accuracy:

- (1) Location of occurrence
- (2) Time of occurrence
- (3) Weather conditions at time of occurrence
- (4) Determine FAA involvement in the investigation.
- (5) Other information pertinent to the investigation.

F. **Determine Method of Investigation.** Base decision on the method of investigation on the information obtained from the reports and existing office policy.

(1) If an on-site investigation is not necessary, conduct the investigation by telephone.

(2) If an on-site investigation is necessary, organize the investigation.

**G. Organize the Incident Investigation.** Organize the incident investigation based on the information received from the reporting facility or person and the following.

(1) Determine if specialties or other participants are required (e.g., operations, airworthiness, avionics, etc.)

(a) If specialties or other participants will not be required, determine method of investigation.

(b) If specialties or other participants will be required, determine which specialties are necessary.

(2) Make request for technical support from the FSDO manager or the appropriate office representative according to office policy and procedures.

(3) Brief all participants on their responsibilities and the preliminary incident information.

(4) If the investigation can be conducted by using the office telephone, conduct a telephone investigation.

(5) If the investigation requires an on-site investigation, make preparations for on-site investigation.

**H. Telephone Investigation.** Contact each of the owners and/or pilots and all identified witnesses for a statement regarding the incident. Use FAA Form 1360-33 to record all pertinent information concerning the witness, including the witness' name, address, and a telephone number for future contact. Document the date and time of the occurrence and request a written statement, if required and the witness is willing.

**I. On-Site Investigation Preparation.** Before leaving office for the incident site, perform and/or obtain the following:

(1) Coverage of accident standby during absence

(2) Office Accident/Incident Investigation Kit

(3) Proper clothing (Reference Related Task #168, Investigate an Accident.)

(4) Notify the appropriate designated person in the office of:

(a) Location of on-site investigation

(b) Estimated time of arrival

(c) A list of any persons from the office that are accompanying you

(d) A telephone number where you can be reached and/or the beeper number

(e) Estimated time of return, if known

**J. Conduct the Investigation.** Conduct the investigation in accordance with the following procedures, as required.

(1) If the NTSB is conducting the investigation, provide assistance and reports as requested by the NTSB.

(2) If the NTSB delegated the investigation to the FAA, conduct the investigation in accordance with the following procedures.

(a) Brief all participants, if appropriate

(b) Contact involved parties and obtain witness statements. Use FAA Form 1360-33 for recording the conversation.

(c) If on-site investigation, take pictures using office camera or make arrangements for another participant to take pictures, if appropriate.

(d) Obtain supporting data concerning aircraft, pilot, weather, etc.

(e) If AT personnel or facilities are involved, request comments from the appropriate AT facility.

**K. Conclude Investigation.** Conclude investigation by completing all investigation forms as follows:

(1) For delegated investigations, complete the appropriate sections of FAA Form 8020-5 in accordance with Order 8020.11, Chapter 6, paragraph 260. (Figure 167-5)

(2) If AT personnel or facilities were involved:

(a) If the AT facility does not submit any comments, indicate on FAA Form 8020-5 that an opportunity for comments was afforded.

(b) If the AT facility does submit comments, include those comments as an attachment to FAA Form 8020-5.

(3) For office use, complete Figure 167-4.

(4) If pilot deviation, obtain the incident number from FAA Form 8020-11 and place in the upper right hand corner of section K (Narrative) of FAA Form 8020-5.

(5) If a violation of the FAR is suspected, proceed with procedures in Related Task #182, Conduct a Violation Investigation.

(6) For NTSB or military conducted investigations, complete such reports as requested by the NTSB Investigator-In-Charge or the military group chairman.

(7) Make appropriate number of copies of the report forms for distribution.

L. **Report Distribution.** Distribute aviation incident reports in accordance with Order 8020.11.

M. **WPMS.** Close WPMS file.

## 7. TASK OUTCOMES.

A. Completed preliminary accident report

B. Completed Aircraft Incident Record

## 9. FUTURE ACTIVITIES.

A. Possible violation investigation

B. Provide information to the Accident Prevention Program Manager

C. Testify at hearing

D. Disposal of investigative records

E. Replacement of any items used from the accident kit

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**FIGURE 167-1 PRELIMINARY INCIDENT INFORMATION JOB AID**

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INSPECTOR RECEIVING NOTIFICATION: \_\_\_\_\_ DATE: \_\_\_\_\_

ASSIGNED TO: \_\_\_\_\_ DATE: \_\_\_\_\_

PRELIMINARY INFORMATION REPORT Accident/Incident/Violations/Complaint/Other (Circle One)

NAME OF CALLER: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Time: \_\_\_\_\_

NATURE OF OCCURRENCE \_\_\_\_\_

DATE OF OCCURRENCE \_\_\_\_\_ TIME \_\_\_\_\_ LOCATION \_\_\_\_\_

TYPE A/C \_\_\_\_\_ N# \_\_\_\_\_

DAMAGE: (Circle One) Destroyed/Substantial/Minor/None

ELT ACTIVATED: YES \_\_\_\_ NO \_\_\_\_ DEACTIVATED: YES \_\_\_\_ NO \_\_\_\_

A/C OWNER/OPERATOR \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

Address \_\_\_\_\_

PILOT \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

Address \_\_\_\_\_

CERT # \_\_\_\_\_ GRADE \_\_\_\_\_ RATINGS \_\_\_\_\_

BFR DATE \_\_\_\_ DOB \_\_\_\_ MEDICAL DATE \_\_\_\_ CLASS \_\_\_\_

TOTAL TIME \_\_\_\_ TIME IN TYPE \_\_\_\_ FLT PLAN VFR/IFR/NONE WX BRIEFING \_\_\_\_

PAX # \_\_\_\_\_ FATALITIES \_\_\_\_\_ INJURIES \_\_\_\_\_ SEAT BELTS \_\_\_\_\_

SHOULDER HARNESS USED \_\_\_\_\_

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**FIGURE 167-1 PRELIMINARY INCIDENT INFORMATION JOB AID CON'D**


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TYPE OF FLIGHT: Pleasure/Business/Ag/Ferry/Training/135 OPS/ 121 OPS/133 OPS (Circle)

NOTIFICATION: (NAME/DATE/TIME)

FSS \_\_\_\_\_ WP DUTY OFFICER \_\_\_\_\_

AME \_\_\_\_\_ REGIONAL OFFICE \_\_\_\_\_

NTSB \_\_\_\_\_ WASHINGTON DC \_\_\_\_\_

OFFICE RECORDS:	DATE	INITIALS
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WPMS COMPLETED	_____	_____
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NTSB 6120.19 COMPLETED	_____	_____
------------------------	-------	-------

NTSB 6120.1 TO PILOT	_____	_____
----------------------	-------	-------

AIRMAN RECORDS	_____	_____
----------------	-------	-------

AIRCRAFT RECORDS	_____	_____
------------------	-------	-------

MEDICAL RECORDS	_____	_____
-----------------	-------	-------

RECORDS OF VIOLATIONS/ACCIDENTS	_____	_____
---------------------------------	-------	-------

WITNESS STATEMENTS (#)	_____	_____
------------------------	-------	-------

PICTURES (FROM )	_____	_____
------------------	-------	-------

COPY TO APPM	_____	_____
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FAR(s) VIOLATED \_\_\_\_\_

WPMS CODE \_\_\_\_\_ WPMS # \_\_\_\_\_



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**FIGURE 167-1 PRELIMINARY INCIDENT INFORMATION JOB AID CON'D**

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DESCRIPTION (Use Additional Pages If Necessary):



**FIGURE 167-2 FAA FORM 8020-9, AIRCRAFT ACCIDENT/INCIDENT PRELIMINARY NOTICE**

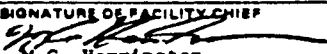
RIS FS 8020-50

<b>AIRCRAFT ACCIDENT/INCIDENT PRELIMINARY NOTICE</b>									
U.S. Department of Transportation Federal Aviation Administration									
FROM (Office of origin)		TO							
ARV		FF KELPYDE BWA RFW FTW LIT OEX RCC							
DATE (GMT)		TIME (GMT)							
Feb 9, 1983		1855							
CODE	(First words of text) AIRCRAFT ACCIDENT/INCIDENT PRELIMINARY NOTICE—Part 1								
A	1 INFORMATION FROM Airville ATCT								
B	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="font-size: x-small;">1 REGISTRATION NO</td> <td style="font-size: x-small;">2 MAKE AND MODEL</td> <td style="font-size: x-small;">3 OPERATOR OF AIRCRAFT</td> </tr> <tr> <td style="text-align: center;">N1234A</td> <td style="text-align: center;">Beechcraft-35</td> <td style="text-align: center;">R.L. Smith</td> </tr> </table>			1 REGISTRATION NO	2 MAKE AND MODEL	3 OPERATOR OF AIRCRAFT	N1234A	Beechcraft-35	R.L. Smith
1 REGISTRATION NO	2 MAKE AND MODEL	3 OPERATOR OF AIRCRAFT							
N1234A	Beechcraft-35	R.L. Smith							
	4 TYPE OF ACTIVITY (Air taxi, instruction, pleasure, general, etc.; business, executive, sightseeing, etc.) IF KNOWN Pleasure								
	5 BRIEF DESCRIPTION OF CIRCUMSTANCES SURROUNDING OCCURRENCE Aircraft struck power pole during ILS approach to Runway 4.								
	6 WEATHER DATA ARV 091226Z 10 OVC 1 SW- 0309/007								
	7 AIRCRAFT DAMAGE    A <input checked="" type="checkbox"/> DESTROYED    B <input type="checkbox"/> SUBSTANTIAL    C <input type="checkbox"/> MINOR    D <input type="checkbox"/> FIRE    E <input type="checkbox"/> NONE								
C	OCCUPANTS—INDICATE INJURIES: FATAL, SERIOUS, MINOR, NONE								
	1 NAME AND ADDRESS OF PILOT INJURY R.L. Smith/Minor RFD 4, Airville, AR		2 NAMES OF CREW INJURIES None						
			3 NO OF PASSENGERS INJURIES 2-Serious 1-None						
D	1 LOCATION OF OCCURRENCE (Nearest city, town and state; give route if overuse or missing) Airville Airport, AR								
E	1 DATE AND TIME OF OCCURRENCE IN GMT Feb. 9, 1983 @1832Z								
F	1 INFORMATION ON COVERAGE OF OCCURRENCE BY FAA, NTSB, OTHER SW-GADO-4								
G	FAA AIR TRAFFIC SERVICES SUMMARY OF FLIGHT HANDLING								
	1A LAST DEPARTURE POINT FYY	1B DATE AND TIME (GMT) Feb 9, 1983 @1630Z	1C INTENDED DESTINATION ARV						
	2A LAST RADIO CONTACT/POSITION AND/OR RADAR POSITION Airville LOM								
	3A LAST ATC CONTROL CLEARANCE Cleared to land								
	4 FLIGHT PLAN    A <input checked="" type="checkbox"/> IFR    B <input type="checkbox"/> VFR    C <input type="checkbox"/> NONE    D <input type="checkbox"/> UNKNOWN								
	5 PILOT BRIEFING    A <input checked="" type="checkbox"/> YES    B <input type="checkbox"/> NO    C <input type="checkbox"/> UNKNOWN								
	6A OTHER								
RECEIVED AT ARV FSS		DELIVERED TO							
RECEIVED VIA <input checked="" type="checkbox"/> IN PERSON <input type="checkbox"/> RADIO <input type="checkbox"/> TELEPHONE		RECEIVED BY (Signature & Title)  J.K. Doaks, Supervisor    ARV FSS							
NOTE: Part 2 <input type="checkbox"/> ON OTHER SIDE <input checked="" type="checkbox"/> ON SEPARATE FORM <input type="checkbox"/> NOT REQUIRED									

FAA Form 8020-9 (12-82)

FIGURE 167-3 FAA FORM 8020-11, INCIDENT REPORT

RM: AT 8020-1

DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION INCIDENT REPORT			
TO: General Aviation District Office Federal Aviation Administration Barnes Municipal Airport Wearfield, Mass. 01085		FROM: Airport Traffic Control Tower Federal Aviation Administration Worcester Municipal Airport Worcester, Mass. 01602	
<p>The following is a description of a deviation/incident. It appeared advisable to prepare a formal record, and a copy is being forwarded to acquaint you with its particulars. It is requested that, as necessary, these details be brought to the attention of the pilot or other individuals involved. We hope that through review, recommendations leading toward action to prevent recurrence of incidents of this type will be obtained. No reply is required; however, the undersigned will be glad to answer any questions at your convenience. Any action you can take to assist the Air Traffic Service to provide more efficient service will be appreciated.</p>			
TYPE OF INCIDENT	TIME OF INCIDENT		INCIDENT NO.
Pilot deviation	DATE: June 30, 1983	<input type="checkbox"/> DAY <input checked="" type="checkbox"/> NIGHT	ORR-ATCT-13
AGENCY/AIRCRAFT IDENTIFICATION			
N2345G, Piper Tripacer			
NAME(S) OF PERSONNEL OR PILOT			
William Denton, Certificate #54321			
SUMMARY OF INCIDENT			
<p>2356Z N2345G, on VFR flight plan from Pittsburg, Pa., to Worcester, Mass., contacted Worcester Tower north of the city of Worcester and requested landing instructions.</p> <p>2357Z Worcester Tower advised N2345G to remain north of the city (outside of control zone), issued current weather and traffic information - a DC-9, N1357, departing runway 27 westbound on V3.</p> <p>2358Z N1357 took off on runway 27.</p> <p>2359Z Worcester Tower observed an aircraft over northeast side of airport. Observed aircraft was identified as N2345G and landing clearance was issued for runway 27 with right turn in.</p> <p>010001Z N2345G landed runway 27.</p> <p>Worcester weather 2355Z: Measured ceiling nine hundred overcast, visibility one and one-half miles, light rain showers, fog, wind two-six-five degrees at ten knots.</p> <p>Flight was conducted within a control zone in weather conditions below the basic VFR minima contrary to an ATC instruction.</p>			
REMARKS			
Pertinent voice recordings, flight progress strips, and weather data are on file at Worcester Tower.			
CC: AAT-340, ARE-500			
ATTACHMENTS		FORWARDED	
None		DATE	SIGNATURE OF FACILITY CHIEF
		July 1, 1983	 H.G. Harrington

FAA Form 8020-11 (8-78)

**FIGURE 167-4 INCIDENT INFORMATION JOB AID**

ACCIDENT _____ INCIDENT _____		
Location of Event _____ Date _____		
NTSB File # _____		
Aircraft Make/Model/Ident# _____		
YES	NO	GENERAL
<input type="checkbox"/>	<input type="checkbox"/>	1. Air Carrier/Airport Security standards or operations involved?
<input type="checkbox"/>	<input type="checkbox"/>	2. Airport certification safety standards or operations involved?
<input type="checkbox"/>	<input type="checkbox"/>	3. Performance of FAA facilities or functions involved?
<input type="checkbox"/>	<input type="checkbox"/>	4. Federal Aviation Regulations adequate?
<input type="checkbox"/>	<input type="checkbox"/>	5. Corrective action regarding items 1, 2, 3, and/or 4 if applicable.
<input type="checkbox"/>	<input type="checkbox"/>	6. Violation of FAR Sections:  <div style="background-color: black; width: 80px; height: 40px; margin-bottom: 5px;"></div> Type of Enforcement Action: ____ Administrative ____ Will be submitted ____ Legal ____ Submitted
<input type="checkbox"/>	<input type="checkbox"/>	7. Airworthiness of FAA certificated aircraft involved? <div style="background-color: black; width: 80px; height: 20px; margin-bottom: 5px;"></div> Corrective Action:
<input type="checkbox"/>	<input type="checkbox"/>	8. Competency of FAA certificated airman/facility involved  <div style="background-color: black; width: 80px; height: 100px; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <span>____ Air Agency</span> <span>____ Air taxi</span> <span>____ Commercial operator</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>____ Air carrier</span> <span>____ Airport</span> <span>____ Airman</span> </div> Corrective Action:

**FIGURE 167-4 INCIDENT INFORMATION JOB AID Con'd**

YES	NO	PILOT	
		Current BFR	
		Attended Pilot Clinic/Safety Meeting	
		Pilot Proficiency Program Participant	
Remarks:			
Date:	FSDO #	Reviewed By: MGR ___ A/W ___ OPS ___ APPM ___	Investigator in Charge

**FIGURE 167-5 FAA FORM 8020-5, AIRCRAFT INCIDENT RECORD**

<b>IDENTIFICATION</b>	1. CODE		2. DATE		3. TIME (Local)		<b>AIRCRAFT INCIDENT RECORD</b>							
	4. CATEGORY <input type="checkbox"/> AIR CARRIER-TYPE: <input type="checkbox"/> AIR TAXI <input type="checkbox"/> GENERAL AVIATION <input type="checkbox"/> COMMUTER <input type="checkbox"/> OTHER					5. DAY OF WEEK		7. LOCATION (City and State)						
						6. COORDINATES		8. NEAREST FIX (Radial and Distance)						
<b>AIRCRAFT</b>	1. AIRFRAME				MAKE/MODEL		TOTAL HOURS		MAKE/MODEL		TOTAL HOURS			
	MAKE/MODEL				SERIAL NO. (Malfunctioning)				SERIAL NO. (Malfunctioning)					
	REGISTRATION NO.		AIRCRAFT CLASS											
	AIRWORTHINESS CLASS				T.S.O. (Malfunctioning)				T.S.O. (Malfunctioning)					
	HOURS													
	T.S.O.		TOTAL TIME		1. _____ 2. _____		3. _____ 4. _____		1. _____ 2. _____		3. _____ 4. _____			
<b>OPERATOR</b>	1. NAME AND ADDRESS					6. AIR CARRIER OPERATING CERTIFICATE NO.		AUTHORIZED OPERATIONS UNDER FAR PARTS:						
	2. FLIGHT NO.		4. MAINT. DESIGNATOR			7. OPERATING CERTIFICATE NO.		AUTHORIZED OPERATIONS UNDER FAR PARTS:						
	3. UNDER FAR		5. CAB 298C FILED <input type="checkbox"/> YES <input type="checkbox"/> NO											
<b>INJURY AND DAMAGE</b>	1. PERSONS INVOLVED		2. PERSONS ABOARD		3. MINOR INJURY		4. SERIOUS INJURY		5. FATAL INJURY		6. DAMAGE		8. TYPE OF FLYING	
	PASSENGERS										NONE		PERSONAL	
	FLIGHT CREW										MINOR		BUSINESS	
	CABIN CREW										SUBSTANTIAL		EXECUTIVE/CORP	
	GROUND CREW										DESTROYED		INSTRUCTION	
	PUBLIC/OTHER										FIRE AFTER IMPACT		AERIAL APPLICATION	
	TOTALS										PROPERTY DAMAGE		INDUSTRIAL/SPECIAL	
	HANDICAPPED										UNKNOWN		FERRY	
	EVACUATION INJURIES										7. PHASE OF OPERATION		TEST	
											GROUND		FOREST FIRE	
											TAXI		PARACHUTE	
											TAKEOFF		AIR SHOW	
											CLIMB		PASSENGER	
											LEVEL FLIGHT		CARGO	
										DESCENT		PASSENGER/CARGO		
										APPROACH		MAIL		
										LANDING		OTHER		
												UNKNOWN		
<b>AIRPORT</b>	9. PART NAME/NO.										6. REMARKS			
	1. NAME <input type="checkbox"/> CONTROLLED <input type="checkbox"/> UNCONTROLLED													
<b>WEATHER</b>	2. RUNWAY NUMBER		3. FIELD ELEVATION		4. RUNWAY LENGTH		5. SURFACE CONDITION							
	1. SOURCE		3. SKY CONDITION		5. VISIBILITY RESTRICTION		7. D.P.		8. WIND		10. REMARKS			
	2. TIME		4. VISIBILITY		6. TEMP.		9. ALTIMETER							

FAA Form 8020-5 (4-80) SUPERSEDES PREVIOUS EDITION

**FIGURE 167-5 FAA FORM 8020-5, AIRCRAFT INCIDENT RECORD Con'd**

<b>AIR TRAFFIC G.</b>	1. CONTROL/COMMUNICATION FACILITY		4. DEPARTURE POINT/DATE/TIME		7. RADAR COVERAGE <input type="checkbox"/> YES <input type="checkbox"/> NO		9. FUEL ON BOARD			
	2. FLIGHT PLAN/CLEARANCE <input type="checkbox"/> IFR <input type="checkbox"/> VFR <input type="checkbox"/> NONE		5. DESTINATION ETA OR ATA		8. RADAR CONTROL <input type="checkbox"/> YES <input type="checkbox"/> NO		10. TYPE APPROACH			
	3. TAKEOFF GROSS WEIGHT/C.G.		6. LAST COMMUNICATION (Position, Time, Altitude)							
<b>CREW HISTORY H.</b>	1. PIC		2. SIC		3. FE					
	NAME									
	DATE OF BIRTH AGE									
	CERTIFICATE NO. AND TYPE									
	DATE OF LAST MEDICAL									
	HOURS THIS MAKE/MODEL									
	HOURS LAST 90 DAYS - MAKE/MODEL									
	TOTAL HOURS LAST 90 DAYS									
	TOTAL HOURS									
	DUTY TIME (Last 24 Hours)									
	RATINGS									
	PROFICIENCY CHECK DATE									
	ROUTE CHECK DATE									
	SIMULATOR CHECK									
	SEAT OCCUPIED									
DOMICILE (City and State)										
OTHER - SPECIFY										
<b>HUMAN FACTORS I.</b>	1. PASSENGERS		2. EQUIPMENT		3. ENVIRONMENT		4. INVESTIGATION		YES	NO
	OBESE		SEATS		SMOKE		NTSB NOTIFIED			
	AGED		RESTRAINTS		FUMES		VOICE RECORDER REVIEW			
	BLIND		EXITS		FIRE		FLIGHT RECORDER REVIEW			
	INFANT		SLIDES		LIGHTS		OFFICE INVESTIGATION			
			RAFTS				SCENE INVESTIGATION			
			VESTS							
<b>DISP J.</b>	1. REPORT SUBMITTED BY				5. SOURCE OF INFO					
	2. OFFICE				6. FAA COORDINATOR/INVEST.					
	3. DATE				7. NTSB INVESTIGATOR					
	4. DISTRIBUTION				8. RELATED REPORTS					
<b>NARRATIVE K.</b>										

U.S. G.P.O. 1980-627-235/1447